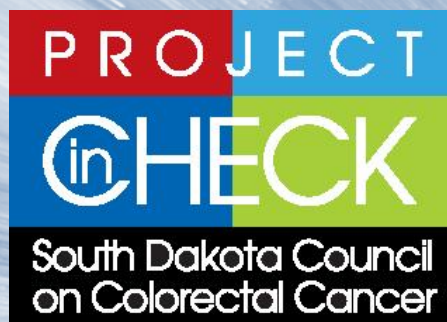


# Colorectal Cancer in South Dakota



## Colorectal Cancer Estimates for 2016<sup>1</sup>

In 2016, South Dakota expects 390 new colorectal cancer cases and 130 deaths due to this cancer. During the same time, an estimated 134,490 newly diagnosed colorectal cancer cases and 49,190 colorectal cancer deaths are projected for the United States.

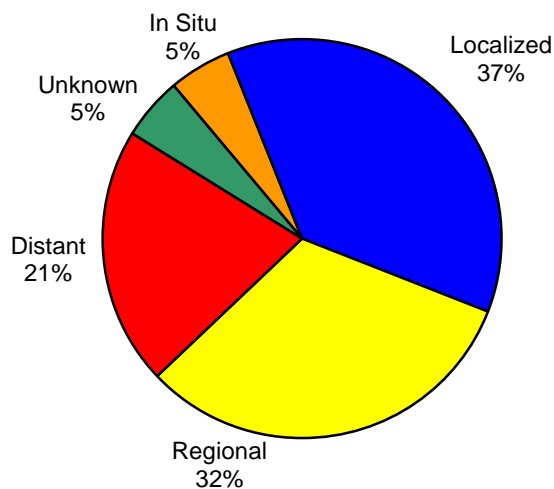
## Incidence and Mortality

During 2009-2013, there was an average of 437 (225 men and 212 women) new invasive cases of colorectal cancer diagnosed among South Dakota residents per year. Of those cases, the white population averaged 408 cases and the American Indian population 25 cases. In 2013, there were 413 invasive and 22 *in situ* colorectal cancers diagnosed. Of that total, 384 invasive and 22 *in situ* cases were white, while 24 invasive cases were American Indian.

In South Dakota, an average of 158 people died annually from colorectal cancer spanning the years from 2009 to 2013. Of that number, 146 were white and 10 were American Indian.

Incidence 2013		Mortality 2013	
Number of cases		Number of deaths	
Total	413	Total	166
Males	206	Males	89
Females	207	Females	77
White	384	White	148
American Indian	24	American Indian	17
Median age at diagnosis	70 yrs	Median age at death	75 yrs
Mode	63 yrs	Mode	75 yrs
Age range at diagnosis	23-98 yrs	Age range at death	41-98 yrs
S.D. age-adjusted incidence rate	40.7	S.D. age-adjusted death rate	16.5
U.S. SEER age-adjusted incidence rate (2012)	*39.7	U.S. SEER age-adjusted death rate (2012)	*14.7

Rates per 100,000 U.S. 2000 Standard Population and S.D. 2013 Estimated Population / \*2013 U.S. SEER age-adjusted rates not available  
Source: South Dakota Department of Health



Source: South Dakota Department of Health

**Figure 1**

### SEER Summary Stage

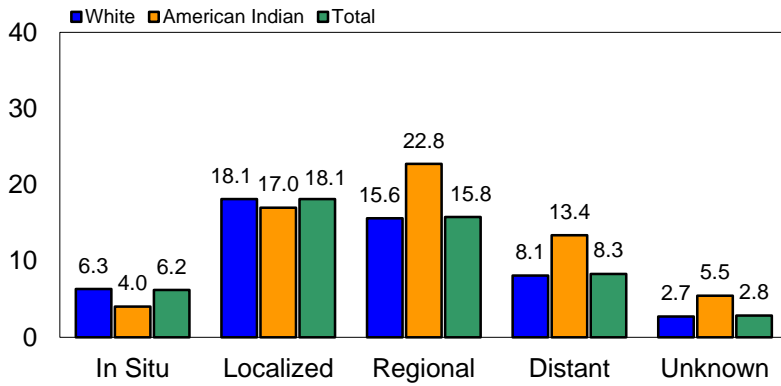
The pie chart at left represents colorectal cancer stage at diagnosis, South Dakota, 2013

### 5-Year Relative Survival for Colorectal Cancer, U.S.

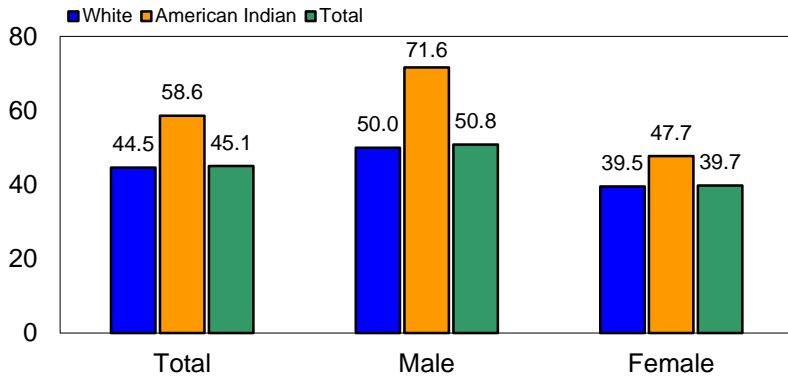
Stage at Diagnosis	5-Year Relative Survival, 2005-2011
Localized	90.1%
Regional	70.8%
Distant	13.1%
Unknown	34.5%

Source: SEER Program [www.seer.cancer.gov](http://www.seer.cancer.gov)

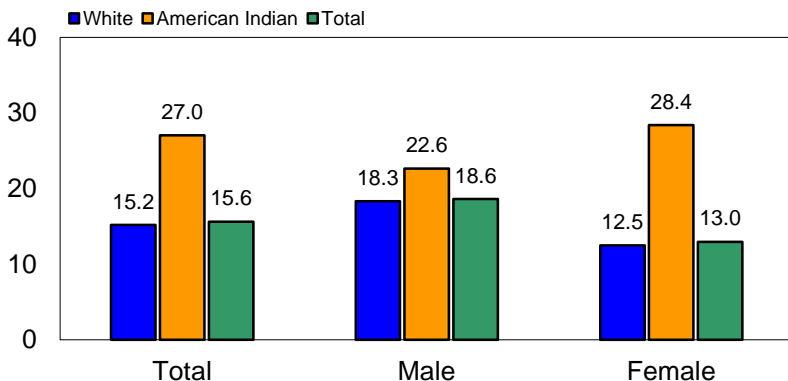
<sup>1</sup>Source: *Cancer Facts and Figures 2016* American Cancer Society



**Figure 2**  
**Stage at Diagnosis Incidence Rate**  
 Age-adjusted incidence rate for colorectal cancer cases at stage of diagnosis by race, South Dakota, 2009-2013



**Figure 3**  
**Colorectal Cancer Incidence Rate**  
 Age-adjusted incidence rate for colorectal cancer cases by race and gender, South Dakota, 2009-2013



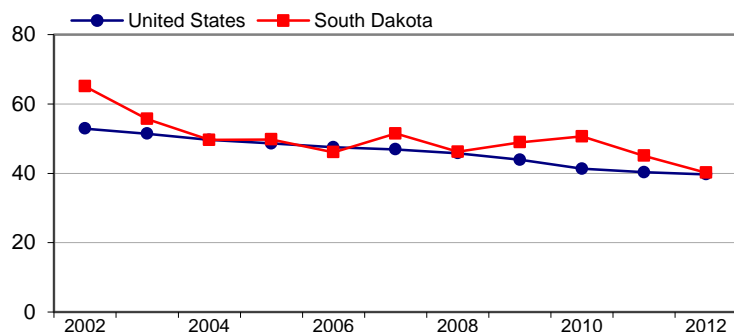
**Figure 4**  
**Colorectal Cancer Mortality Rate**  
 Age-adjusted mortality rate for colorectal cancer deaths by race and gender, South Dakota, 2009-2013

Rates per 100,000 U.S. 2000 Standard Population and S.D. Estimated Population  
 Source: South Dakota Department of Health

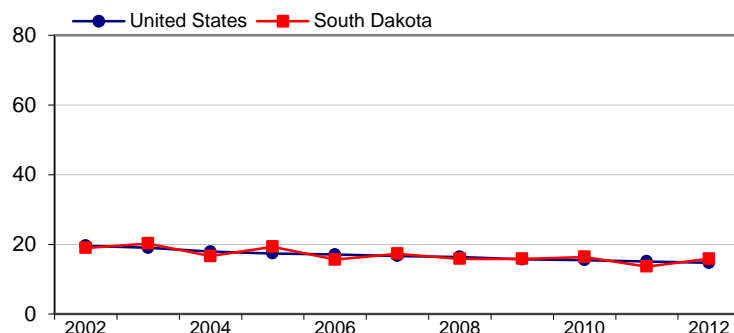
## Modifiable Risk Factors

Diet and physical activity are the most important environmental influences on colorectal cancer. Choices made every day can improve a person's general health. The following changes in diet and lifestyle can reduce the risk of developing colorectal cancer:

- Be physically active every day for 30 minutes or more.
- Limit alcohol to one drink per day for women and two drinks per day for men, if drinking at all.
- Limit red meat and avoid processed meat.
- Maintain a healthy weight throughout life and avoid weight gain—particularly fat around the midsection.
- Get regular screenings by a doctor beginning at age 50 since risk increases with age.
- Be tobacco free. Call the South Dakota QuitLine to enroll at 1-866-737-8487 or for more information go to the website at <http://sdquitline.com/>.



**Figure 5**  
**Colorectal Incidence Rates, United States and South Dakota**  
 Colorectal cancer incidence rates for the United States and South Dakota by year, 2002-2012



**Figure 6**  
**Colorectal Mortality Rates, United States and South Dakota**  
 Colorectal cancer mortality rates for the United States and South Dakota by year, 2002-2012

Rates per 100,000 U.S. 2000 Standard Population and S.D. Estimated Population, U.S. rates are provided by SEER Program, National Cancer Institute <http://www.seer.cancer.gov/canques/>, Source: South Dakota Department of Health



- The **BEST** colorectal cancer screening test is the one that gets done.
- Patients should discuss an individualized colorectal cancer screening plan with their physician.
- View a provider video that discusses the recommendations for colorectal cancer screening at <http://www.getscreenedsd.org/provider>.

## Colorectal Cancer Screening Recommendations

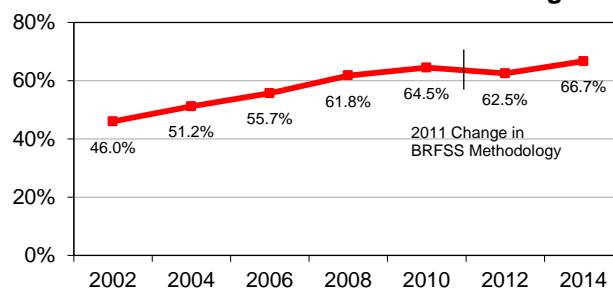
The U.S. Preventative Services Task Force (USPSTF) recommends screening for colorectal cancer using high-sensitivity fecal occult blood testing (FOBT), sigmoidoscopy with interval FOBT, or colonoscopy for adults beginning at age 50 and continuing until age 75 years. The Behavioral Risk Factor Surveillance System (BRFSS) data for colorectal cancer screening participation of South Dakotans ages 50 to 75 years is displayed in the figures below. As shown, one in three South Dakotans do not participate in the USPSTF recommended colorectal cancer screenings.

**Figure 7**  
**SD Adults, Age 50-75 Years, 2014 Colorectal Cancer Screening Participation By Test Type**

Participated in Screening		No Participation in Screening
Blood Stool Test Only	2.8%	33.3%
Sigmoidoscopy/Colonoscopy Only	58.6%	
Both - Blood Stool Test and Sigmoidoscopy/Colonoscopy	5.3%	
Total	66.7%	

Source: South Dakota BRFSS 2014

**Figure 8**  
**SD Adults, Age 50-75 Years, Up-To-Date With Recommended Colorectal Cancer Screenings**



Source: South Dakota BRFSS